

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10/69970S FILING DATE

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4						
5						
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25	1					
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39						
40	1					
41						
42		1				
43						
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45						
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48						
49		1				
50						
TOTAL IND.	11	1	4	1		
TOTAL DEP.	16		3	2		
TOTAL CLAIMS	28		7			

CLAIMS	IND	DEP	IND	DEP	IND	DEP
51	1					
52	1					
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100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

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